

Chapel Reservation Form for Weddings

Date of Application: _____ Protestant _____ Roman Catholic _____ Jewish _____

PROPOSED Date of Wedding _____ Time _____

PROPOSED Date of Rehearsal _____ Time _____

Bride: _____ Rank _____ Home Phone () _____

Address/Unit _____ Work Phone () _____

Denomination/Faith Group _____

Home Church/Synagogue _____

Previously Married? Yes _____ No _____

Status: Active Duty _____ Reserve _____ Retired _____ Dependent (w/ID) _____

Army _____ Navy _____ Marine _____ Coast Guard _____ Congregant _____

Groom: _____ Rank _____ Home Phone () _____

Address/Unit _____ Work Phone () _____

Denomination/Faith Group _____

Home Church/Synagogue _____

Previously Married? Yes _____ No _____

Status: Active Duty _____ Reserve _____ Retired _____ Dependent (w/ID) _____

Army _____ Navy _____ Marine _____ Coast Guard _____ Congregant _____

Mail Address after Wedding: _____

Name of Officiating Clergy: _____ Phone () _____

Address: _____

Consent to perform wedding received? Yes _____ No _____ Date _____

Wedding Coordinator _____ **Organist** _____

Who Attended the interview? Bride _____ Groom _____ Other _____

Interviewing Chaplain/NCOIC Signature: _____

Please do not turn in Reservation Form until all co-ordinations are completed.